## EXHIBIT 15

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DOCUMENT# P97000100024

Entity Name: **BLUE SPIKE**, INC.

Jan 20, 2013 Secretary of State

**Current Principal Place of Business:** 

16711 COLLINS AVENUE #2505 SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:** 

16711 COLLINS AVENUE #2505 SUNNY ISLES BEACH, FL 33160

FEI Number: 65-0798557 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## Officer/Director Detail Detail:

Title PD

Name MOSKOWITZ, SCOTT

Address 16711 COLLINS AVE #2505

City-State-Zip: SUNNY ISLES BEACH FL 33160

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: /SCOTT MOSKOWITZ/

P

01/20/2013